΄ι	_PAIENT.	APPLICATION Effec	DN FEE D			ON RECO	RD			06	5088S	<u>r</u>
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E		OR	OTHER	R THAN ENTITY
TOTAL CLAIMS			18					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEI	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			/8_ minus 20=		* B			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 - minus 3 =		0			X42=		1	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT									<del>                                     </del>	OR		
* If the difference in column 1 is less than zero, enter "0" in column 2							l	+140=	<u> </u>	OR	<u> </u>	<u> </u>
		LAIMS AS A						TOTAL		OR	TOTAL	7000
		(Column 1)	AMENDE!	(Colun	nn 2)	(Column 3)	•	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	,	HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	* 18	Minus	** 10	<u> </u>	= /		X\$ 9=		OR	X\$18=	
AME	Independent	* Z	Minus	*** 6	<u> </u>	<i>A</i>		X42=		OR	X84=	
	FINOI PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		l	+140=		OR	+280=	·
							L	TOTAL			TOTAL	
		(Column 1)		(Colum	n 2\	(Column 3)	A	DDIT. FEE		OR	ADDIT. FEE	
AMENUMENI B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ST SER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
2	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
Į.	Independent	*	Minus	***		=	F	X42=			X84=	
١	FIRST PRESE	NTATION OF ML	JLTIPLE DE	PENDENT	CLAIM		┢			OR		
							L	+140=		OR	+280=	
							Al	TOTAL DOIT. FEE		OR ,	TOTAL ADDIT. FEE	
7		(Column 1)		(Colum		(Column 3)	_					
AMENDMENIC		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	T	X\$ 9=		OR	X\$18=	
	Independent	t	Minus	***		E	F			ŀ		
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	X42=		OR	X84≃	
• H	the entry in colum	nn 1 is less than the	o ootni la salii	ma 2	n• I=•			+140=		OR	+280=	
-	the "Highest Nur the "Highest Nur	nber Previously Pa mber Previously Pa mber Previously Pak ber Previously Pak	id For IN THI: id For IN THI	S SPACE is S SPACE is	less than	20, enter "20."		TOTAL OIT. FEE			TOTAL DDIT. FEE	

Application or Docket Number